DECLARATION FOR Attorney Docket No. CIRC012 UTILITY OR DESIGN First Named Inventor Mark Vange PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) Application Number □ Declaration OR Declaration Filing Date Submitted Submitted after with Initial Initial Filing--Group Art Unit surcharge 37 CFR Filing 1.16(e) required **Examiner Name** As a below named Inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD AND SYSTEM FOR REDIRECTION TO ARBITRARY FRONT-ENDS IN A COMMUNICATION SYSTEM Hard. the specification of which is attached hereto ÒR was filed on as U.S. Application No. or (MM/DD/YYYY) PCT International Application No. and was amended on (if applicable) (MM/DD/YYYY) hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. \overline{I} acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I hereby claim foreign priority benefits under 35 U.S.C § 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. Prior Foreign Appl. No.(s) Foreign Filing Date Priority Not Certified Copy Attached? Country (MM/DD/YYYY) Claimed Yes П П

Additional foreign application nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

Application Number(s) Filing Date (MM/DD/YYYY)

60/197,490 4/17/00

DECLARATION – Utility or Design Patent Application

application of this claims of this provided by to patentabie and the national control of the con	designati s applica the first lity as de onal or F	enefit under 39 ang the United ation is not dis paragraph of 3 fined in 37 CF CT internation	State close 35 U. FR 1.5	es of Ame od in the p S.C. 112, 56 which ing date o	erica, listed prior United I acknow became a of this app	d belo d State ledge vailab	w and, es or P the dut le betw	insof CT in	ar as the iternation	subjenal apping	ect matte plication ation wh	er o Lin	f each of the the manner	
U.S. Parent Application or PCT Parent No.						Parent Filing Date (MM/DD/YY)					Parent Patent No. (if applicable)			
						(III a					(II ap	, piii	cable)	
Addition	al U.S. o	r PCT internat	tional	application	on nos. lis	ted or	PTO/	SB/02	2B attacl	ned he	reto.			
Custome OR	ousiness er Numbe	, I hereby app in the Patent er 25235 tioner(s) nam	Trade	emark Off Plac stration r	fice conne ce bar cod number lis	cted to le labe	herewitel here	th: →→	25	235	5	lica	tion and to	
	Name				ation per	PATENT TRADE Name					MARK OFFICE R		egistration Number	
							···	- 114					Number	
Additional registered practitioner(s) named on supplemental sheet PTO/SB/02C attached hereto.														
Direct all correspondence to: Customer Number or Bar Code Label							OR 🛛 Correspondence							
Name	Stuart	or Bar Code Label address below t T. Langley, Esq.												
Address	Hogan	n & Hartson, LLP												
Address	1200 1	7 th Street, S	uite	1500	10 T MA									
City	Denve	State CO ZIP 80202								0202				
Country	US	Telephone (720)				106-5335 F					ax (720) 406-5301			
hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of Sole or First Inventor: A petition has been filed for this unsigned inventor.														
Given Name (first and middle [if any]) Family Name or Surname														
Mark						Vange								
Inventor's Signature						Date								
Residence City Toronto			State	ON		Country Ca		Canada	Cit	Citizenship		Canada		
Post Office Address 2800 - 1 Adelaide Street East														
Post Office A	ddress													
City Toronto				State	ON		ZIP	M5C 2V9		Со	Country C		anada	
⊠Additional	inventors	s are named c	on <u>2</u>	_supplem	ental addi	tional	invent	or(s)	sheet(s)	PTO/S	SB/02A	atta	iched	
								-				_		

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page _1_ of _2

Name of Additional Jo	☐ A petition has been filed for this unsigned inventor									
Given Name (first	Family Name or Surname									
Glenn Sydney	Wilson									
Inventor's Signature					Date					
Residence: City	Toronto	State	ON	Country	Canada	Citizenship	Canada			
Post Office Address	#204 - 137 Ronces	valles Avenue								
Post Office Address										
iiCity	Toronto	State ON		ZIP M6R 2L2		Country	Canada			
Name of Additional Jo	☐ A petition has been filed for this unsigned inventor									
Given Name (first a	Family Name or Surname									
Michael	Kouts									
ilnventor's Signature				Date						
Residence: City	Toronto	State	ON	Country	Canada	Citizenship	Israel			
Post Office Address										
Post Office Address										
City	Toronto	State	State ON ZIP		M2H 1T4 Country		Canada			
Name of Additional Jo	☐ A petition has been filed for this unsigned inventor									
Given Name (first	Family Name or Surname									
Plumb	Marc									
Inventor's Signature				Date						
Residence: City	Toronto	State	ON	Country Canada		Citizenship	Canada			
Post Office Address	2800 - 1 Adelaide Street East									
Post Office Address										
City	Toronto	State	ON ZIP M5C 2V9			Country	Canada			

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>

Name of Additional Joint Inventor, if any:					☐ A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])					Family Name or Surname									
Alexandr				Chekhovtsov										
nventor's ignature						Date								
Brampton	State				Country		Citizenship	Ukraine						
Post Office Address 2800 - 1 Adelaide				Street East										
City Toronto		State		ON ZIP		M5C 2V9	Country	Canada						
Name of Additional Joint Inventor, if any:				☐ A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])				Family Name or Surname										
energy at the state of the stat														
Inventor's -≛Signature						Date								
Residence: City		State		С	ountry		Citizenship							
			,											
City		state	Ž		ZIP		Country							
Name of Additional Joint Inventor, if any:					\square A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])				Family Name or Surname										
Inventor's Signature						Date								
Residence: City		State		C	Country		Citizenship							
Post Office Address					•		· · · · · · · · · · · · · · · · · · ·							
			· · · · · · · · · · · · · · · · · · ·											
City		ite	Z		ZIP ZIP		Country							
	Brampton 2800 - 1 Adelaide Toronto int Inventor, if any:	Brampton St. 2800 - 1 Adelaide St. Toronto St. Ind middle [if any]) St. St. St. St. St. St. St. St	and middle [if any]) Brampton 2800 - 1 Adelaide Street Ea Toronto State int Inventor, if any: State State State State int Inventor, if any: and middle [if any])	Brampton State 2800 - 1 Adelaide Street East Toronto State ON pint Inventor, if any: A petition has state S	Brampton State 2800 - 1 Adelaide Street East Toronto State ON oint Inventor, if any: State State On State Ind middle [if any]) State Condition has been state or state Ind middle [if any]) State Condition has been state or state Ind middle [if any]) State Condition has state Ind middle [if any]) State Condition has state Ind middle [if any])	Brampton State Country 2800 - 1 Adelaide Street East Toronto State ON ZIP oint Inventor, if any: A petition has been filed from the state of the	And middle [if any]) State Country	and middle [if any]) Family Name or Surname Chekhovtsov Date Brampton State Country Citizenship 2800 - 1 Adelaide Street East Toronto State ON ZIP M5C 2V9 Country Ind middle [if any]) Family Name or Surname Date State Country Citizenship State ZIP Country Country int Inventor, if any: A petition has been filed for this unsigned inventor Citizenship Family Name or Surname State ZIP Country Country int Inventor, if any: A petition has been filed for this unsigned invertor Family Name or Surname State ZIP Country Citizenship State State Country Citizenship Country Citizenship						